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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 |
| | Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|--|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Dorothy | |
| | First name | First name |
| Write the name that is on your government-issued | C. | _ |
| picture identification (for | Middle name | Middle name |
| example, your driver's license or passport | Edwards | |
| license or passport | Last name | Last name |
| Bring your picture identification to your | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| meeting with the trustee. | Sullix (Si., Ji., II, III) | Suriix (Sr., Sr., II, III) |
| 2. All other names you | Dorothy | |
| have used in the last | First name | First name |
| 8 years | | - |
| Include your married or | Middle name | Middle name |
| maiden names. | Hunter | - Last same |
| | Last name | Last name |
| | First name | First name |
| | | |
| | Middle name | Middle name |
| | | |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 9039 | xxx - xx- |
| Security number or federal Individual | OR | OR |
| Taxpayer | 9 xx - xx- | 9 xx - xx- |
| Identification number (ITIN) | | |

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| Debtor 1 Dorothy | C. Edwards | Case number (if known) |
|--|---|--|
| First Name | Middle Name Last Name | |
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | | If Debtor 2 lives at a different address: |
| | 3623 173rd Court, Apt 3D Number Street | Number Street |
| | Lansing Illinois 60438 City State Zip Code | City State Zip Code |
| | Cook | |
| | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| | Oity State Zip Code | City State Zip Code |
| 6. Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have | Check one: Over the last 180 days before filing this petition, I have |
| to file for bankruptcy | lived in this district longer than in any other district. | lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |

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| Debtor 1 Dorothy | C. | Edwards | | Case number (if knd | own) | |
|---|--|---|--|--|--|--|
| First Name | Middle Nam | | | | | |
| Part 2: Tell the Court Abo | out Your Bankrup | tcy Case | | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | brief description of each, see B2010)). Also, go to the top o | | | | ndividuals Filing for |
| 8. How you will pay the fee | more details a cashier's che may pay with I need to pay Individuals t | entire fee when I file my about how you may pay. Ty ck, or money order If your a credit card or check with the fee in installments. If a Pay Your Filing Fee in Installment (You nut is not required to, waive overty line that applies to you his option, you must fill out and file it with your petition | rpically, if your attorney is a pre-printed you choose tallments (Conay request your fee, and our family sit the Application of the state of the sta | ou are paying the submitting you ed address. This option, sign official Form 103 this option only d may do so only ze and you are u | e fee yourself, r payment on and attach to A). If you are filing the your incorunable to pay to the results of the pay to th | you may pay with cash, your behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If |
| 9. Have you filed for bankruptcy within the last 8 years? | No. ✓ Yes. District District District | Northern District of Illinois | When When When | 1/31/2014 MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number | 14-03226 |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to Case number, Relationship to Case number, | if known |
| 11. Do you rent your residence? | ✓ No. | e 12. r landlord obtained an eviction Go to line 12. Fill out <i>Initial Statement About</i> this bankruptcy petition. | | | | |

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C. Edwards Debtor 1 Dorothy Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Dorothy C. Edwards Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 Dorothy First Name | C. Middle Name | Edwards Ca | ase number (if known) | |
|---|--|--|--|--|
| | estions for Reporting Purpose | S | | |
| 16. What kind of debts do you have? | "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily | al primarily for a personal, far a personal person | umer debts are defined in 11 U.S.C. samily, or household purpose." as debts are debts that you incurred to operation of the business or investment debts or business debts. | to obtain |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that No. | er 7. Do you estimate that after | r any exempt property is excluded and ribute to unsecured creditors? | administrative |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | ☐ 25,001-50,00 ☐ 50,001-100,0 ☐ More than 100 | 00 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 \$10,000,001-\$10 \$50,000,001-\$10 \$100,000,001-\$ | 50 million | 01-\$10 billion 001-\$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$1 \$10,000,001-\$: \$50,000,001-\$: \$100,000,001-\$: | 50 million | 01-\$10 billion 001-\$50 billion |
| Part 7: Sign Below | Lhava avancia ad thia natition a | and I declare under noncitu | of perjury that the information provi | aladia turra anad |
| For you | correct. If I have chosen to file under C of title 11, United States Code under Chapter 7. If no attorney represents me ar out this document, I have obta I request relief in accordance w I understand making a false state connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341, /s/ Dorothy Edwards | hapter 7, I am aware that I is. I understand the relief available of I did not pay or agree to ined and read the notice revith the chapter of title 11, latement, concealing proper case can result in fines up 1519, and 3571. | may proceed, if eligible, under Chapi ailable under each chapter, and I cho pay someone who is not an attorney equired by 11 U.S.C. § 342(b). United States Code, specified in this ty, or obtaining money or property be to \$250,000, or imprisonment for up | ter 7, 11,12, or 13 ose to proceed y to help me fill s petition. |
| | Signature of Debtor 1 Executed on11/9/2017 | | Signature of Debtor 2 Executed on | |
| | | D / YYYY | MM / DD / YYY | Y |

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| Debtor 1 Dorothy | C. | Edwards | Case number (ii | fknown) |
|--|---------------------------|-------------------------|----------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | , or 13 of title 11, Unite | nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § 3 | 342(b) and, in a case in | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge afte | r an inquiry that the i | nformation in the sched | dules filed with the petition is incorrect. |
| attorney, you do not | • | , , | | • |
| need to file this page. | /s/ Amy Gerstein | | Date | 11/9/2017 |
| | Signature of Attorney | or Debtor | | /IM / DD / YYYY |
| | g | | | |
| | | | | |
| | Amy Gerstein | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | | | | |
| | 20 S. Clark Street Street | | | |
| | 28th Floor | | | |
| | 2811 F1001 | | | |
| | Chicago | | Illinois | 60603 |
| | City | | State | Zip Code |
| | • | | | · |
| | Contact phone | 3128374023 | Email address | agerstein@semradlaw.com |
| | | | | |
| | | | Illinois | <u> </u> |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your ca | ase: | |
|------------------------|----------------------------|-------------|----------------------|
| Debtor 1 | Dorothy | C. | Edwards |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you owr |
|--|---|
| Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | 010.104.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$10,184.00 |
| 1c. Copy line 63, Total of all property on <i>Schedule A/B</i> | \$10,184.00 |
| t 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule L | \$4,200.00 |
| | \$755.08 |
| | \$755.06 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$80,765.84 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | 9/33.00 |
| | \$80,765.84 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$80,765.84 \$85,720.92 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$80,765.84 \$85,720.92 |

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C Edwards Debtor 1 Dorothy _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,470.67 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$755.08 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$28,967.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$29,722.08

9g. Total. Add lines 9a through 9f.

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| Fill in this | informa | ation to identify your ca | ase: | | | | | |
|--|------------------------------|---|---|-----------------------|---|---------------------|--|---|
| Debtor 1 | _ | Dorothy | C. | | Edwards | | | |
| Dahtau | F | First Name | Middle N | ame | Last Name | | | |
| Debtor 2 (Spouse, if fi | ling) | First Name | Middle N | ame | Last Name | | | |
| United Sta | ates Bar | kruptcy Court for the: | Northern | | District of Illinois | | | |
| | | apto, court to: uto. | . 1011110111 | | (State) | | | |
| Case num (If known) | nber _ | | | | | | | |
| Officia | J Fo | rm 1064/D | | | | | | Check if this is an |
| Officia | ai FO | rm 106A/B | | | | | | amended filing |
| Sche | dule | A/B: Prope | rty | | | | | 12/1 |
| category v responsibl write your | where y le for su name | rou think it fits best. B upplying correct inforr and case number (if k | e as complete a mation. If more s nown). Answer e | nd ac pace very | asset only once. If an asset fits in mo curate as possible. If two married ped is needed, attach a separate sheet to question. r Other Real Estate You Own or I | ople are this fo | e filing together, both a rm. On the top of any a | re equally |
| | | | | | y residence, building, land, or similar | | | |
| | | to Part 2 | | | , rootaonoo, banang, tana, or oninar | ргорого | ,. | |
| | Yes. W | here is the property? | | | | | | |
| | | | | Wh | at is the property? Check all that apply. | | Do not deduct secured | claims or exemptions. Put |
| 1.1 | Ctroot | address, if available, or o | ath or description | | Single-family home | | | red claims on Schedule D: nims Secured by Property. |
| | Succió | address, ii avallable, or c | otilei description | | Duplex or multi-unit building | | Current value of the | Current value of the |
| | | | | | Condominium or cooperative | | entire property? | portion you own? |
| | | | | Н | Manufactured or mobile home Land | | - | |
| | Numbe | er Street | | H | Investment property | | Describe the nature o | |
| | | | | Ħ | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | | Other | | | |
| | | | | Wh | o has an interest in the property? Che | ck | Check if this is co (see instructions) | mmunity property |
| | | | | one | | | | |
| | | | | 님 | Debtor 1 only | | | |
| | | | | Н | Debtor 2 only Debtor 1 and Debtor 2 only | | | |
| | | | | H | At least one of the debtors and another | | | |
| | | | | Oth | er information you wish to add about | this ite | m, such as local | |
| | | | | | perty identification number: | | • | |
| If you | own or | have more than one, lis | st here: | Wh. | at is the property? Check all that apply. | | Do not doduct socured | claims or exemptions. Put |
| 1.2 | | | | | Single-family home | | the amount of any secu | red claims on Schedule D: |
| | Street a | address, if available, or o | other description | П | Duplex or multi-unit building | | | ims Secured by Property. |
| | | | | | Condominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | | Manufactured or mobile home | | | |
| | Numbe | er Street | | | Land Investment property | | Describe the nature o | f your ownership |
| | | | | H | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | H | Other | | | |
| | | | | Wh | o has an interest in the property? Che | ok | Check if this is co (see instructions) | mmunity property |
| | | | | one | | CK | (see instructions) | |
| | | | | | Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | 닏 | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | |
| | | | | | | thio :+- | m such as local | |
| | | | | | er information you wish to add about perty identification number: | uns ite | iii, sucii as local | |

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| Debtor 1 | Dorothy First Name | C. Middle Name | Edwards Last Name | Case numbe | r (if known) | |
|--------------------------------|---|---|---|------------------|---|---|
| | et address, if available, or ot | her description Zip Code | Mhat is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and and property identification number: | — ? Check one. | the amount of any secu Creditors Who Have Class Current value of the entire property? Describe the nature of interest (such as fee interest) Check if this is con (see instructions) | imple, tenancy by |
| | the dollar value of the po ve attached for Part 1. Wr | rtion you own for a | all of your entries from Part 1, inclu | uding any entrie | s for pages | |
| Do you ow you own tl | nat someone else drives. If y ns, trucks, tractors, sport ut | equitable interest ou lease a vehicle, | t in any vehicles, whether they are also report it on Schedule G: Executor cycles | - | - | |
| 3.1 | Make Model: Year: Approximate mileage: Other information: | Chevrolet Impala 2001 192326 | Who has an interest in the propone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an | d another | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$2300.00 |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | who has an interest in the propone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions) | d another | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |

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| | Dorothy | C. | Edwards | Case number | | |
|------|---|-------------|--|--|---|---|
| | First Name | Middle Name | Last Name | | | |
| 3.3 | Make | | Who has an interest in the p | roperty? Check | | claims or exemptions. P |
| | Model: | | one. | | | red claims on <i>Schedule</i> aims Secured by Propert |
| | Year: | | Debtor 1 only | | Creditors virio mave Cia | ums secured by Property |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | / | entire property? | portion you own? |
| | | | At least one of the debtors | and another | | |
| | | | Check if this is communi | tv property (see | | |
| | | | instructions) | ., p. opo, (eee | | |
| 3.4 | Make | | Who has an interest in the p | roperty? Check | Do not deduct secured | claims or exemptions. P |
| | Model: | | one. | | | red claims on <i>Schedule</i> |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | aims Secured by Property |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | / | entire property? | portion you own? |
| | | | At least one of the debtors | and another | | |
| | | | Check if this is communi | tv property (see | | |
| | | | | ., b. obo, (ooo | | |
| Exam | | | instructions) ner recreational vehicles, other version of the state o | | | |
| Exam | nples: Boats, trailers, motor No Yes Make | | ner recreational vehicles, other ventry ft, fishing vessels, snowmobiles, m Who has an interest in the pi | otorcycle accessor | Do not deduct secured | • |
| Exam | nples: Boats, trailers, motor No Yes Make Model: | | ther recreational vehicles, other vents, fishing vessels, snowmobiles, m Who has an interest in the prone. | otorcycle accessor | Do not deduct secured the amount of any secu | ıred claims on <i>Schedule</i> |
| Exam | nples: Boats, trailers, motor No Yes Make | | who has an interest in the prone. Debtor 1 only | otorcycle accessor | Do not deduct secured the amount of any secu Creditors Who Have Cla | claims or exemptions. P red claims on <i>Schedule</i> nims Secured by Property |
| Exam | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only | otorcycle accessor | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Property Current value of the |
| Exam | nples: Boats, trailers, motor No Yes Make Model: Year: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | otorcycle accessor roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Property |
| Exam | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only | otorcycle accessor roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Property Current value of the |
| Exam | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | otorcycle accessor roperty? Check , and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communication. | roperty? Check and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communications | roperty? Check and another ty property (see | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property? Do not deduct secured the amount of any secu | claims on Schedule sims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Other information: Make Model: Year: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communities instructions) Who has an interest in the prone. | roperty? Check and another ty property (see | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. F |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communities instructions) Who has an interest in the prone. | roperty? Check and another ty property (see | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property? Do not deduct secured the amount of any secu | claims on Schedule sims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Other information: Make Model: Year: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communicinstructions) Who has an interest in the prone. Debtor 1 only | otorcycle accessor roperty? Check and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule hims Secured by Property |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communicinstructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only | roperty? Check and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule hims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communitinstructions) Who has an interest in the prone. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only | roperty? Check and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule hims Secured by Property Current value of the |

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Debtor 1 Dorothy Edwards Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Furniture & Goods \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$350.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$680.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Jewelry \$215.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1745.00 for Part 3. Write that number here

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Debtor 1 Dorothy Edwards Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$175.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$-43.00 17.1. Checking account: PNC 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Comerica Prepaid \$0.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Deb. | tor 1 Dorothy | C. | Edwards | Case number (if known) | |
|------|------------------------------------|---|---------------------------|---|----------|
| | First Name | Middle Name | Last Name | | <u> </u> |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer assuer name: | checks, promissory no | tes, and money orders. | |
| 21. | ✓ No | | , thrift savings accounts | s, or other pension or profit-sharing plans | |
| | Yes. List each account separately. | 401(k) or similar plan: Pension plan: | | | |
| | | IRA: Retirement account: | | | |
| | | Keogh: Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 22 | Appuition (A contract for | | wou either for life or fo | r a number of years) | |
| 23. | ✓ No Yes | or a periodic payment of money to Issuer name and description: | you, ether for life or to | a number of years) | |
| | | | | | |
| | | | | | |

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| Debt | tor 1 Dorothy | C. | Edwards | Case number (if known) | |
|------|--|---|--|--|---|
| 24 | First Name | Middle Name | Last Name | or a qualified state tuition program | |
| 24. | 26 U.S.C. §§ 530(b)(1), 5 | | in a qualified ABLE program, or und | er a quaimed state tuition program. | |
| | ✓ No Institution Yes | name and description. | Separately file the records of any interest | sts.11 U.S.C. § 521(c): | |
| | | | | | |
| 25. | | | rty (other than anything listed in line | e 1), and rights or powers | |
| | exercisable for your ben | letit | | | |
| | Yes. Describe | | | | |
| 26. | | | ets, and other intellectual property oceeds from royalties and licensing agre | eements | |
| | No | , | | | |
| | Yes. Describe | | | | |
| 27. | Licenses, franchises, an Examples: Building permit | - | ngibles cooperative association holdings, liquor | licenses, professional licenses | |
| | ✓ No Yes. Describe | | | | |
| | Too. Boodings | | | | |
| | | | | | |
| Moi | ney or property owed t | o you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or property owed t | o you? | | | portion you own? Do not deduct secured |
| | Tax refunds owed to you | o you? | | | portion you own? Do not deduct secured |
| | Tax refunds owed to you No Yes. Give specific information in the second of the second | rmation Antic | ipated Tax Refund | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to you | rmation Antic uding whether the returns | ipated Tax Refund | State: | portion you own? Do not deduct secured claims or exemptions. \$6007.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, incluyou already filed and the tax years Family support | rmation Antic uding whether the returns | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$6007.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including you already filed and the tax years Family support Examples: Past due or lum | rmation Antic uding whether the returns | ipated Tax Refund sal support, child support, maintenance, | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$6007.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, incluyou already filed and the tax years Family support Examples: Past due or lum No | rmation uding whether the returns s p sum alimony, spous | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$6007.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, incluyou already filed and the tax years Family support Examples: Past due or lum | rmation uding whether the returns s p sum alimony, spous | | State: Local: , divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$6007.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, incluyou already filed and the tax years Family support Examples: Past due or lum No | rmation uding whether the returns s p sum alimony, spous | | State: Local: , divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$6007.00 \$0.00 t \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, incluyou already filed and the tax years Family support Examples: Past due or lum No | rmation uding whether the returns s p sum alimony, spous | | State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: | \$6007.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including you already filed and the tax years Family support Examples: Past due or lum No Yes. Give specific information | rmation uding whether the returns s p sum alimony, spous rmation | | State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$6007.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including you already filed and the tax years Family support Examples: Past due or lum No Yes. Give specific information Other amounts someone Examples: Unpaid wages, | rmation uding whether the returns s p sum alimony, spous rmation | | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$6007.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you No Yes. Give specific information about them, including you already filed and the tax years Family support Examples: Past due or lum No Yes. Give specific information Other amounts someone Examples: Unpaid wages, | rmation uding whether the returns s p sum alimony, spous rmation | al support, child support, maintenance, | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$6007.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Dorothy | C. | Edwards | Case number (if known) | |
|------|-------------------|--|---|---|---|
| | First Name | Middle Nan | ne Last Name | | |
| 31. | | nsurance policies alth, disability, or life insurance; h | ealth savings account (HSA); credit, h | nomeowner's, or renter's insurance | |
| | | e the insurance company olicy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | If you are the | in property that is due you from beneficiary of a living trust, expect use someone has died. | m someone who has died of proceeds from a life insurance polic | y, or are currently entitled to receive | _ |
| | ✓ No Yes. Desc | ribe | | | |
| 33. | | st third parties, whether or no cidents, employment disputes, in | t you have filed a lawsuit or made surance claims, or rights to sue | a demand for payment | |
| | ✓ No Yes. Desc | ribe | | | |
| 34. | Other contin | • | of every nature, including counter | claims of the debtor and rights | |
| | No Yes. Desc | ribe | | | |
| 35. | Any financia | assets you did not already lis | t | | |
| | Yes. Des | ribe | | | |
| 36. | | | om Part 4, including any entries fo | | \$6139.00 |
| Part | 5: Describ | e Anv Business-Related P | roperty You Own or Have an I | nterest In. List any real estate in Pa | urt 1. |
| 37. | | | interest in any business-related pr | | |
| 37. | - | | | -61 | Current value of the |
| | ✓ No. Go to | | | | portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts re | eivable or commissions you a | Iready earned | | or anamphone |
| | ✓ No Yes. Des | ribe | | | |
| 39. | Examples: Bu | nent, furnishings, and supplies siness-related computers, softwa | | achines, rugs, telephones, desks, chairs, ele | ectronic devices |
| | V No Yes. Desc | ribe | | | |
| | | | | | |

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| Deb | tor 1 Dorothy | C. | Edwards | Case number (if known) | |
|--------|-------------------------|-----------------------------------|---|--------------------------------|--|
| 10 | First Name | Middle Name | Last Name | da | |
| 40. | | equipment, supplies you | use in business, and tools of your t | rade | |
| | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| 42. | Interests in partnersh | ips or joint ventures | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | Name of entity: | % of ownership: | |
| | information about | | | | _ |
| | them | | | | |
| | | | | | |
| 40 | O . 1 | Para 11 9 - 1 | | | - |
| 43. (| Customer lists, mailing | lists, or other compilat | ions | | |
| | ✓ No | | | | |
| | Yes. Do your lists i | nclude personally identifia | ble information (as defined in 11 U.S.0 | C. § 101(41A))? | |
| | ☐ No | | | | |
| | Yes. Desc | ribe | | | |
| | | | | | |
| 44. | Any business-related | property you did not alr | eady list | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | <u> </u> |
| | | | | | |
| | | | art 5, including any entries for pag | | |
| for Pa | art 5. Write that numbe | er here | | | |
| Part | 6 Describe Any F | arm- and Commerci | al Fishing-Related Property Yo | ou Own or Have an Interest In. | |
| · ar | If you own or have ar | n interest in farmland, list it i | n Part 1. | | |
| 46. | Do you own or have a | ny legal or equitable in | terest in any farm- or commercial f | ishing-related property? | |
| | No. Go to Part 7. | | | | Current value of the |
| | Yes. Go to line 47. | | | | portion you own? Do not deduct secured claims |
| | | | | | or exemptions |
| 47. | Farm animals | | | | |
| | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | <u> </u> | | | | |
| | | | | | |

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| Debt | tor 1 Dorothy First Name | C. Middle Name | Edwards Last Name | Case number (if known) | |
|--------------|--------------------------------|--|--------------------------|------------------------------|--------------|
| 48. | Crops-either growing | or harvested | | | |
| | No Yes. Describe | | | | |
| 49. | Farm and fishing equi | pment, implements, machinery, fixt | ures, and tools of trade | • | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing supp | blies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 51 | Any form- and comme | ercial fishing-related property you di | d not already list | | |
| 51. | No | ercial listillig-related property you di | u not aneauy nst | | |
| | Yes. Describe | | | | |
| | | | | | |
| 52. Ad | dd the dollar value of a | ıll of your entries from Part 6, includ | ing any entries for pag | es you have attached | |
| | | er here | | | |
| | | | | | |
| | | | | | |
| Part 7 | | operty You Own or Have an Inte | | l Not List Above | |
| 53. | | pperty of any kind you did not alread ts, country club membership | y list? | | |
| | ✓ No | | | | |
| | Yes. Give specific information | | | | |
| | imomation | | | | |
| | | | | | |
| 54. A | dd the dollar value of a | all of your entries from Part 7. Write | that number here | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8 | 8: List the Totals of | f Each Part of this Form | | | |
| 55. F | Part 1: Total real estat | e, line 2 | | > | |
| 56. p | oart 2 total vehicles, li | ne 5 | \$2300.00 | | |
| 57. P | art 3: Total personal a | nd household items, line 15 | \$1745.00 | _ | |
| 58. P | art 4: Total financial a | ssets, line 36 | \$6139.00 | _ | |
| 59. F | Part 5: Total business- | related property, line 45 | φ0100.00 | | |
| 60. F | Part 6: Total farm- and | fishing-related property, line 52 | | | |
| | | perty not listed, line 54 | - | _ | |
| | | . Add lines 56 through 61 | \$10184.00 | | + \$10184.00 |
| | | | | Copy personal property total | |
| 63. T | otal of all property on | Schedule A/B. Add line 55 + line 62 | | | \$10184.00 |

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| Fill in this information to identify your case: | | | | | | |
|---|-----------------------|-------------------|------------------------------|--|--|--|
| Debtor 1 | Dorothy First Name | C. Middle Name | Edwards Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai | Part 1: Identify the Property You Claim as Exempt | | | | | | | | |
|-----|---|---|--|--|--|--|--|--|--|
| 1. | . Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. | | | | | | | | |
| | You are claiming state and federal r | onbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | | | | |
| | You are claiming federal exemptions | s. 11 U.S.C. § 522(b)(| 2) | | | | | | |
| 2. | For any property you list on Schedule A | For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below. | | | | | | | |
| | Brief description of the property and | Current value of | Amount of the exemption you claim | Specific laws that allow exemption | | | | | |
| | line on Schedule A/B that lists this property | the portion you own | Check only one box for each exemption. | | | | | | |
| | | Copy the value from Schedule A/B | | | | | | | |
| | Brief description: | \$2,300.00 | ✓ \$0 | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | | | | |
| | Chevrolet Impala, 2001 Line from | | 100% of fair market value, up to any | = | | | | | |
| | Schedule A/B: 03 | | applicable statutory limit | | | | | | |
| | Brief | | | 735 ILCS 5/12-1001(b) | | | | | |
| | description: | (\$43.00) | ✓ | | | | | | |
| | Checking account, PNC Line from | | 100% of fair market value, up to any | - | | | | | |
| | Schedule A/B: 17 | | applicable statutory limit | | | | | | |
| 3. | (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No | | | | | | | | |
| | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No | | | | | | | | |
| | ☐ Yes | | | | | | | | |

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Debtor 1 Dorothy C. Edwards Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$500.00 description: **✓** \$500.00 Misc. Household 100% of fair market value, up to any **Furniture & Goods** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(a) Brief \$680.00 description: **✓** \$680.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$350.00 description: \$350.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$215.00 description: **✓** \$215.00 Misc. Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 735 ILCS 5/12-1001(b) Brief \$175.00 description: \$175.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 Brief 735 ILCS 5/12-1001(g)(1) \$6,007.00 description: **✓** \$6,007.00 Federal, Anticipated Tax 100% of fair market value, up to any Refund applicable statutory limit Line from Schedule A/B: 28 Brief 735 ILCS 5/12-1001(b) \$0.00 description:

\$0

100% of fair market value, up to any

applicable statutory limit

Other financial account,

17

Comerica Prepaid

Line from Schedule A/B:

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| | | | Do | ocument Page 22 of | 74 | | |
|--------------------------|--|--|---|--|---|--|--------------------------------------|
| Fill in | this informat | tion to identify your cas | se: | | | | |
| Debto | _ | orothy rst Name | C. Middle Name | Edwards Last Name | | | |
| Debto (Spouse | r 2 | rst Name | Middle Name | Last Name | | | |
| United | l States Bank | cruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case r | number n) | | | (2.5.3) | | | |
| Offi | cial Fo | orm 106D | | | _ | | Check if this is a amended filing |
| Sch | nedule | D: Credito | ors Who Ha | ve Claims Secur | ed by Prop | erty | 12/1 |
| more s name a 1. [| space is need and case nutraged on the case nutraged on the case is not case in the case in the case in the case is not case in the case i | ded, copy the Additio mber (if known). litors have claims se | ecured by your prope it this form to the court | le are filing together, both are equipment the entries, and attach it to entry? with your other schedules. You ha | this form. On the top | of any additional pag | |
| Part 1 | | Secured Claims | | | | | |
| 2. | List all sec separately for | ured claims. If a credit or each claim. If more th | nan one creditor has a pa | cured claim, list the creditor rticular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | Midwest Titl Creditor's Nan 17350 Torr Number | пе | 2001 Chevrolet Impala | y that secures the claim: e, the claim is: Check all that apply. | <u>\$4,200.00</u> | \$2,300.00 | \$1,900.00 |
| | Lansing City Who owes to Debtor | IL 60438 State ZIP Code the debt? Check one. 1 only | Unliquidated Disputed Nature of lien. Check | all that apply. | | | |
| | | 1 and Debtor 2 only one of the debtors | car loan) | made (such as mortgage or secured as tax lien, mechanic's lien) | | | |
| | Check | if this claim relates mmunity debt | Other (including a | right to offset) Title Loan | | | |
| | in a command | | Last 4 digits of accou | ınt number | | | |

Add the dollar value of your entries in Column A on this page. Write that number

incurred

here:

\$4,200.00

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|--|---|--|--|---|--|--|--|
| Fill in this in | nformation to identify your case: | | | | | | |
| Debtor 1 | Dorothy First Name | C. Middle Name | Edwards Last Name | | | | |
| Debtor 2 (Spouse, if filing | | Middle Name | Last Name | | | | |
| United State | es Bankruptcy Court for the: North | nern | District of Illinois(State) | | | | |
| Case numb (If known) | per | | (Otato) | | | | |
| Official | Form 106E/F | | | | Che | ck if this is an | amended filing |
| Sche | dule E/F: Credit | ors Who | Have Unsecure | ed Claims | ; | | 12/15 |
| other party Form 106A/ claims that the entries known). | to any executory contracts or un /B) and on Schedule G: Executory are listed in Schedule D: Credito | expired leases the Contracts and United States (Contracts and United States) the Continuation For Each Continuation For Each Continuation For Each Contract Contract Contract Contract Contract Contract Contract Contract Con | itors with PRIORITY claims and P at could result in a claim. Also lis nexpired Leases (Official Form 10 ns Secured by Property. If more s Page to this page. On the top of a | t executory contract 6G). Do not include a pace is needed, copy | s on <i>Schedu</i> any creditors the Part yo | lle A/B: Prop s with partia u need, fill i | erty (Official Ily secured t out, number |
| | y creditors have priority unsecure lo. Go to Part 2. ′es. | ed claims against | you? | | | | |
| listed, As mu Contir | identify what type of claim it is. If a uch as possible, list the claims in alph nuation Page of Part 1. If more than | claim has both pric habetical order acco one creditor holds | more than one priority unsecured clority and nonpriority amounts, list the ording to the creditor's name. If you a particular claim, list the other credits for this form in the instruction boo | at claim here and show have more than two p ors in Part 3. | both priority | and nonprior | rity amounts. |
| | | | | | Total claim | Priority amount | Nonpriority amount |
| Prior | R-Bankruptcy Section ity Creditor's Name Box 64338 | | Last 4 digits of account number When was the debt incurred? | n/a | \$755.08 | \$755.08 | \$0.00 |
| Num | ber Street | | As of the date you file, the claim apply. | is: Check all that | | | |
| <u>Chic</u> City | eago Illinois State | 60664 Zip Code | Contingent Unliquidated | | | | |
| Who | incurred the debt? Check one. Debtor 1 only | _,p | Disputed | | | | |
| | Debtor 2 only | | Type of PRIORITY unsecured cla | im: | | | |
| | Debtor 1 and Debtor 2 only | | Domestic support obligations Taxes and certain other debts | vou owe the | | | |
| | At least one of the debtors and anot | ther | government | | | | |
| | Check if this claim relates to a c | ommunity debt | Claims for death or personal in intoxicated | jury while you were | | | |
| ls th | e claim subject to offset? | | Other Specify | | | | |

Other. Specify ___

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Debtor 1 Dorothy Edwards Case number (if known) Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 Aarons \$1,654.69 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 654 Torrence Avenue Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60409 Calumet City Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **✓** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Furniture Loan Is the claim subject to offset? Yes 4.2 Capital One \$436.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 30285 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 84130 Salt Lake Cty Utah City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Credit Card Is the claim subject to offset? **✓** No Yes CMRE FINANCIAL SERVICE 4.3 \$960.00 Last 4 digits of account number Nonpriority Creditor's Name 3075 E IMPERIAL HWY STE When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **BREA** California 92821 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting For - Radiology Imaging Other. Specify Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

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C Debtor 1 Dorothy Edwards Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 CMRE FINANCIAL SERVICE \$205.00 Last 4 digits of account number Nonpriority Creditor's Name 3075 E IMPERIAL HWY STE When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 92821 **BREA** California City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Collections Is the claim subject to offset? **✓** No Yes 4.5 Comcast \$191.32 Last 4 digits of account number _ Nonpriority Creditor's Name 11621 E. Marginal Way # 5 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated Seattle Washington 98168 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Cable Is the claim subject to offset? **✓** No Yes 4.6 Commonwealth Edison \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Ctr FI 4 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60181 Oakbrook Ter Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Electric

✓ No Yes

Is the claim subject to offset?

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Debtor 1 Dorothy
First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

CON COL MGMN
Nonpriority Creditor's Name
POB 1839

When was the debt incurred?

Total claim

\$141.00

When was the debt incurred?

Total claim

\$141.00

| | After listing any entries on this page, number them beginni | ng with 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|---|-------------|
| 4.7 | CON COL MGMN | Last 4 digits of account number 4471 | \$141.00 |
| | Nonpriority Creditor's Name POB 1839 | When was the debt incurred? 7/2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | MARYLAND Missouri 63043 | | |
| | HEIGHTS | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts Collection; Collecting for | |
| | Is the claim subject to offset? | Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL | |
| | ▼ No | | |
| | Yes | | |
| 4.8 | CON COL MGMN | Last 4 digits of account number 4470 | \$52.00 |
| | Nonpriority Creditor's Name POB 1839 | When was the debt incurred? 7/2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | MARYLAND Missouri 63043 | Contingent | |
| | HEIGHTS | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL | |
| | No | <u> </u> | |
| | | | |
| | Yes | | |
| 4.9 | CREDIT ACCEPTANCE Nonpriority Creditor's Name | Last 4 digits of account number 3365 | \$10,670.00 |
| | PO BOX 513 | When was the debt incurred? 2/2016 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Southfield Michigan 48037 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 only | Student loans | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Automobile | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |

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C Debtor 1 Dorothy Edwards Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Credit Collection Services \$75.18 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 725 Canton Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 02062 Norwood Massachusetts City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting For - Geico Casualty Company Is the claim subject to offset? **✓** No Yes Crest Financial \$700.00 4.11 Last 4 digits of account number Nonpriority Creditor's Name 61 W 13490 S When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Allie Rodriguez Contingent Unliquidated Draper Utah 84020 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Furniture Loan Other. Specify _ Is the claim subject to offset? **✓** No Yes **DIVERSIFIED CONSULTANT** 4.12 \$349.00 Last 4 digits of account number 8155 Nonpriority Creditor's Name When was the debt incurred? 6/2017 10550 DEERWOOD PARK BLVD Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated JACKSONVILLE 32256 Florida City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify <u>Collecting For - AT&T Uverse</u> Is the claim subject to offset? **✓** No

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C Debtor 1 Dorothy Edwards Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 **DIVERSIFIED CONSULTANT** \$211.00 Last 4 digits of account number Nonpriority Creditor's Name 10550 DEERWOOD PARK BLVD When was the debt incurred? 7/2017 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 32256 JACKSONVILLE Florida City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collecting For - AT&T Mobility Is the claim subject to offset? **✓** No Yes 4.14 DriveTime \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 29018 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Phoenix Arizona 85038 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Notice Only Is the claim subject to offset? **✓** No Yes First National Collection Bureau, Inc 4.15 \$57.85 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 610 Waltham Way n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 89434 Sparks Nevada City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Collecting For - Washington Other. Specify Mutual Bank Is the claim subject to offset? **✓** No

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C Debtor 1 Dorothy Edwards Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 LC SYSTEM INC \$75.00 7001 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7/2014 PO BOX 64378 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 55164 SAINT PAUL Minnesota City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Collecting For - AT&T Is the claim subject to offset? **✓** No Yes LVNV FUNDING LLC 4.17 \$701.00 9056 Last 4 digits of account number _ Nonpriority Creditor's Name 5/2017 P.O. Box 52815 When was the debt incurred? As of the date you file, the claim is: Check all that apply. c/o Jeremy T. McCullough Aldridge Pite Haan, LLP Contingent Unliquidated Atlanta Georgia 30355 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Collecting For - Credit One Bank Is the claim subject to offset? **✓** No Yes MCCARTHY BURGESS & WOL 4.18 \$55.00 Last 4 digits of account number 0000 Nonpriority Creditor's Name When was the debt incurred? 6/2017 1111 GATEWAY SVC PARK Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated MORRISTOWN 37813 Tennessee City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collecting For - Nicor Gas Is the claim subject to offset? **✓** No

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C Debtor 1 Dorothy Edwards Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 Nicor Gas \$152.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 0632 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60507 Aurora Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Gas Is the claim subject to offset? **✓** No Yes 4.20 NTL ACCT SRV \$1,366.00 9280 Last 4 digits of account number __ Nonpriority Creditor's Name 12/2012 1246 University # 421 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Saint Paul Minnesota 55104 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Collecting For - Fifth Third Bank Is the claim subject to offset? **✓** No Yes **OVERLND BOND** 4.21 \$14,908.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8/2014 4701 W FULLERTON Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CHICAGO 60639 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify __ Automobile Is the claim subject to offset? **✓** No

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C Debtor 1 Dorothy Edwards Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 PORTFOLIO RECOV ASSOC \$655.00 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 When was the debt incurred? 1/2012 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **NORFOLK** Virginia 23502 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collecting For - HSBC Nevada Is the claim subject to offset? **✓** No Yes 4.23 Progressive Leasing \$612.80 Last 4 digits of account number _ Nonpriority Creditor's Name 10619 South Jordan Gateway # 100 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated South Jordan Utah 84095 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Furniture Lease Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.24 Santander Consumer USA \$17,011.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2012 14101 MYFORD RD FL 2 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated TUSTIN California 92780 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Automobile Is the claim subject to offset? **✓** No

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C Debtor 1 Dorothy Edwards Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 The Psychology Center, Inc. \$60.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10343 S. Western Avenue As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60643 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Medical Is the claim subject to offset? **✓** No Yes 4.26 US DEPT OF ED/GLELSI \$15,656.00 8581 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 6/2010 2401 INTERNATIONAL LN Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON 53704 Wisconsin Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes US DEPT OF ED/GLELSI 4.27 \$13,311.00 1577 Last 4 digits of account number Nonpriority Creditor's Name 2401 INTÉRNATIONAL LN When was the debt incurred? 8/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON 53704 Wisconsin Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No

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Debtor 1 Dorothy C. Edwards Case number (if known)
First Name Middle Name Last Name

| collection agency collection agency | is trying to collect here. Similarly, if y | from you for a del ou have more that | ot you owe to someon on one creditor for an | ne else, list the or y of the debts that | u already listed in Parts 1 or 2. For example, if a riginal creditor in Parts 1 or 2, then list the tyou listed in Parts 1 or 2, list the additional 2, do not fill out or submit this page. | | |
|-------------------------------------|---|---|--|---|--|--|--|
| Fifth Third Bank | | | | in Part 1 or Part | 2 did you list the original creditor? | | |
| 04400 4 1 1 4 4 | | | l in a 4 00 | -f (Obl- | | | |
| 8140 S. Ashland Av Number Street | ve. | | Line 4.20 | of <i>(Check one):</i> | Part 1: Creditors with Priority Unsecured Claim | | |
| Tramber Officer | | | | , | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Chicago | Illinois | 60620 | | ooount number | | | |
| City | State | Zip Code | Last 4 digits of | account number | 9280 | | |
| Credit One Bank | | | | | | | |
| Name | | | On which entry | in Part 1 or Part | 2 did you list the original creditor? | | |
| PO Box 60500 | | | Line 4.17 | of (Check | Part 1: Creditors with Priority Unsecured Claim | | |
| Number Street | | | | one): | Part 2: Creditors with Nonpriority Unsecured | | |
| | | | | | Claims | | |
| City of Industry | California | 91716 | Last 4 digits of | account number | 9056 | | |
| City | State | Zip Code | | | | | |
| HSBC Bank Nevada, N.A Name | | On which entr | in Part 1 or Part | 2 did you list the original creditor? | | | |
| Name | | | | , | | | |
| 1111 N Town Cent | ter Dr | | Line 4.22 | of <i>(Check</i> one): | Part 1: Creditors with Priority Unsecured Claim | | |
| Number Street | | | | onej. | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Las Vegas | Nevada | 89144 | Last 4 digits of | account number | 8981 | | |
| City | State | Zip Code | | | | | |
| AT&t Uverse | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| Name | | | | , | | | |
| PO Box 64794 | | | Line 4.12 | of <i>(Check</i> one): | Part 1: Creditors with Priority Unsecured Claim | | |
| Number Street | | | <u> </u> | onej. | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Saint Paul | Minnesota | 55164 | Last 4 digits of | account number | 8155 | | |
| City | State | Zip Code | | | | | |
| AT&T Mobility Name | | | On which entr | in Part 1 or Part | 2 did you list the original creditor? | | |
| | | | | | | | |
| One AT&T Way, Ro | om 3A 104 | | Line <u>4.13</u> | of <i>(Check one):</i> | Part 1: Creditors with Priority Unsecured Claim | | |
| Number Street | | | | onej. | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Bedminster | New Jersey | 07921 | Last 4 digits of | account number | 5440 | | |
| City | State | Zip Code | | | | | |
| AT&T | | | On which onto | in Part 1 or Port | 2 did you list the original creditor? | | |
| Name | | | On windin entry | | | | |
| PO Box 105262 | | | Line 4.16 | of (Check one): | Part 1: Creditors with Priority Unsecured Claim | | |
| Number Street | | | <u></u> | опеј. | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Atlanta | Georgia | 30348 | Last 4 digits of | account number | 7001 | | |
| City | State | Zip Code | | | | | |
| Nicor Gas Name | | | On which entry | in Part 1 or Part | 2 did you list the original creditor? | | |
| | | | | | | | |
| Po Box 549 Number Street | | | Line 4.18 | of <i>(Check one):</i> | Part 1: Creditors with Priority Unsecured Claim | | |
| Maniper Sueer | | | | ····· | Part 2: Creditors with Nonpriority Unsecured | | |
| | Illinois | 60507 | <u>—</u> | | Claims | | |
| Aurora | | | Last 4 digits of | | 0000 | | |

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| | Dorothy First Name | C. Middle Name | Edwards Last Name | Case number (if known) | | | |
|---|---|---|---|--|--|--|--|
| art 3: | List Others to Be Notified | About a Debt That Yo | u Already Listed | | | | |
| colle colle cred | ection agency is trying to colle ection agency here. Similarly, litors here. If you do not have a | ect from you for a debt you if you have more than on additional persons to be | ou owe to someone else, li ne creditor for any of the de | that you already listed in Parts 1 or 2. For example, if a st the original creditor in Parts 1 or 2, then list the ebts that you listed in Parts 1 or 2, list the additional arts 1 or 2, do not fill out or submit this page. | | | |
| Name | iology Imaging Consultants, SC | - пагуеу | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| 75 Remittance Dr., Dept 1254 Number Street | | Line 4.3 of (Ch. one): | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Chic | | 60675 | Last 4 digits of account | | | | |

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Debtor 1 Dorothy C. Edwards Case number (if known)

| First Nar | ne Middle Name Last Name | | | | | | |
|--------------------------|--|--------|-----------------------------|----------|---------------|------|--|
| Part 4: Add th | e Amounts for Each Type of Unsecured Claim | | | | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for st | tatistical reporting purpos | es only. | . 28 U.S.C. § | 159. | |
| | | | Total claims | | | | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | | | | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$755.08 | | | | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | | | | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | | | | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$755.08 | | | | |
| | | | Total claims | | | | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$28,967.00 | | | | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | | | | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | | | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$51,798.84 | | | | |
| | Gi Total Add lines Of through Gi | e: | \$80,765.84 | | | | |

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| Fill in this infor | mation to identify your c | ase: | | |
|---|---------------------------|-------------|----------------------|--|
| Debtor 1 | Dorothy C. | | Edwards | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | |
| Case number | | | (State) | |

| Official | Form | 106G |
|----------|------|------|
|----------|------|------|

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person o | r company with whom yo | ou have the contract or lease | State what the contract or lease is for |
|-------------------|------------------------|-------------------------------|---|
| Riverwood Name | d Apartment Homes | | Residential Lease, Debtor is Lessee, Annual Lease |
| Number | Street | | |
| Lansing | Illinois | 60438 | |
| City | State | Zip Code | |

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| Fill in this infor | mation to identify you | r case: | | |
|---------------------------------|-------------------------|---|---------------------------------------|--|
| Debtor 1 | Dorothy | C. | Edwards | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for th | e: Northern | District of Illinois | |
| Case number | | | (State) | |
| (If known) | | | | |
| | | | | Check if this is ar amended filing |
| Official | Form 106H | I | | arrended filling |
| | | _ | | |
| Schedul | e H: Your Co | odebtors | | 12/15 |
| No Yes Within the | e last 8 years, have y | f you are filing a joint case, do ou lived in a community pro Mexico, Puerto Rico, Texas, W | operty state or territory? (<i>C</i> | odebtor.) Community property states and territories include Arizona, California, |
| | Go to line 3. | riexico, Fuerto Nico, Texas, W | rashington, and wisconsin.) | |
| | | mer spouse, or legal equiva | alent live with you at the tim | e? |
| | No | | | |
| | Yes. In which commu | ınity state or territory did yo | u live? | Fill in the name and current address of that person. |
| | Name of your spouse | e, former spouse, or legal equ | rivalent | <u> </u> |
| | Number Street | | | <u> </u> |
| | Number Street | | | |
| | City | State | Zip Code | |
| again as | a codebtor only if tha | t person is a guarantor or o | osigner. Make sure you ha | our spouse is filing with you. List the person shown in line 2 ve listed the creditor on Schedule D (Official Form 106D), ule D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| Fill in this in | formation to identify | your case: | | | | | | | |
|---|--|--|------------------------|-----------------|--------------|--------------------|-----------------------------------|----------|-------------------|
| Debtor 1 | Dorothy | C. | Edwa | | | _ | | | |
| | First Name | Middle Name | Last N | lame | | Che | ck if this is: | | |
| Debtor 2 (Spouse, if filing | First Name | Middle Name | Last N | lame | | - 🗖 | An amended filing | | |
| | | | | | | | A supplement showing | post-pe | tition chapter 13 |
| the: | Bankruptcy Court for | Northern | District of III_ (S | inois State) | | - " | expenses as of the follow | owing da | te: |
| Case number | - | | | | | _ ; | MM / DD / \\ | | |
| (If known) | | | | | | | MM / DD / YYYY | | |
| Official | Form 106I | | | | | | | | |
| Schedu | le I: Your In | come | | | | | | | 12/15 |
| information spouse. If m number (if k | about your spouse. I | | d your spou | se is | not filing | with you, do | not include informa | tion ab | out your |
| 1. Fill in you | ur employment | | Debtor 1 | | | | Debtor 2 | | |
| informati | | Foots and date | | | | | | | |
| | ve more than one job, | Employment status | Emplo | - | | | Employed | | |
| | eparate page with on about additional | | ☐ Not E | mploy | ed | | Not Employed | | |
| employers | S. | Occupation | Home Hea | alth Aic | de | | | | |
| | art time, seasonal, or oyed work. | Employer's name | A & Z Hon | ne Hea | alth Inc | | | | |
| | | Employer's address | 3043 Ridg | ge Rd | STE 201 | | | | |
| | on may include student naker, if it applies. | | Number St | reet | | | Number Street | | |
| | | | | | | | | | |
| | | | Lansing | | Illinois | 60438 | _ | | |
| | | | City | | State | Zip Code | City | State | Zip Code |
| | | How long employed there? | 2 years 10 |) mon | ths | | | _ | |
| Part 2: Gi | ve Details About N | Monthly Income | | | | | | | |
| Part 2. Gi | ve Details About it | nonting income | | | | | | | |
| | onthly income as of t ss you are separated. | the date you file this form | n. If you have | nothi | ng to repo | rt for any line, v | vrite \$0 in the space. Ir | nclude y | our non-filing |
| , , | r non-filing spouse hav , attach a separate she | e more than one employer, et to this form. | combine the | inforn | nation for a | all employers fo | | es belov | v. If you need |
| | | | | | For D | ebtor 1 | For Debtor 2 or non-filing spouse | | |
| | | ary, and commissions (befo , calculate what the monthly | | 2. | | \$696.80 | | _ | |
| 3. Estima | te and list monthly ove | rtime pay. | | 3. | | + \$0.00 | | | |
| 4. Calcula | ate gross income. Add l | ne 2 + line 3. | | 4. | | \$696.80 | | | |

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| Debtor | 1Dorothy | | Edwards | | Case numbe | er (if | | |
|------------------------|--|---|--------------|----------|------------------------|-----------------------------------|------|-------------------------|
| | First Name | Middle Name | Last Name | | known) For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Сору | line 4 here | | → 4 | ۱. " | \$696.80 | | | |
| | all payroll ded | | | | | | | |
| 5a. 1 | гах, Medicare, | and Social Security deductions | 5 | āa. | \$53.32 | | | |
| 5b. I | Mandatory cor | ntributions for retirement plans | 5 | b. | \$0.00 | | | |
| 5c. \ | oluntary cont | ributions for retirement plans | 5 | ōc. | \$0.00 | | | |
| 5d. I | Required repay | yments of retirement fund loans | 5 | īd. | \$0.00 | | | |
| 5e. I | nsurance | | 5 | ēe. | \$0.00 | | | |
| 5f. C | Domestic supp | ort obligations | 5 | ōf. | \$0.00 | | | |
| 5g. l | Union dues | | 5 | īg. | \$0.00 | | | |
| 5h. (| Other deduction | ons. Specify: | 5 | 5h. + | \$0.00 + | · · · | | |
| | | ductions. Add lines 5a + 5b + 5c + 5d + 5e +5 | | 8. | \$53.32 | | | |
| 7. Calc | ulate total mo | nthly take-home pay. Subtract line 6 from line | e 4. 7 | 7. | \$643.48 | | | |
| 8. List 8 | all other incon | ne regularly received: | | | | | | |
| t | ousiness, profe | , | | | | | | |
| ç | | ent for each property and business showing ordinary and necessary business expenses, and y net income. | | Ba. | \$0.00 | | | |
| 8b. I | Interest and di | vidends | 8 | Bb. | \$0.00 | | | |
| | Family support dependent reg | payments that you, a non-filing spouse, or ularly receive | а | | | | | |
| C | divorce settleme | , spousal support, child support, maintenance, ent, and property settlement. | 8 | Bc. | \$754.00 | | | |
| 8d. l | Unemployment | t compensation | 8 | 3d. | \$0.00 | | | |
| | Social Security | | 8 | Be. | \$0.00 | | | |
| Ir c u h S | nclude cash ass cash assistance inder the Supple lousing subsidie Specify: | ent assistance that you regularly receive sistance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es e Programs Income | | ßf. | \$381.0 <u>0</u> | | | |
| 8g. I | Pension or reti | irement income | 8 | Bg. | \$0.00 | | | |
| 8h. (| Other monthly | income. Specify: | 8 | 3h. + | \$0.00 + | | | |
| 9. Add | all other incon | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. 9 | 9. | \$1,135.00 | | | |
| | | rincome. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp | | 10. | \$1,778.48 | = | | \$1,778.48 |
| Inclu frien | ide contribution ds or relatives. | gular contributions to the expenses that you is from an unmarried partner, members of your amounts already included in lines 2-10 or amo | r household | , your o | lependents, your roomi | | | |
| Spec | cify: | | | | | 1 | 1. + | \$0.00 |
| | | n the last column of line 10 to the amount in the Summary of Schedules and Statistical Su | | | | | 2. | \$1,778.48 |
| | | | - | | | · | | Combined monthly income |
| 13. Do | you expect an | increase or decrease within the year after | you file thi | s form' | · | | | |
| | Yes. Explain: | | | | | | | |

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| | | Docu | ment Page 40 of 7 | 4 | | |
|--|---|---------------------------------|--|-----------------------------------|--|--------------|
| Fill in this infor | mation to identify your | case: | | | | |
| Debtor 1 | Dorothy | C. | Edwards | | | |
| Debtor 2 | First Name | Middle Name | Last Name | Check if this is: | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filir | ıg | |
| United States E | Bankruptcy Court for the | : Northern [| District of Illinois | A supplement she expenses as of t | | • |
| Case number (If known) | | | (State) | MM / DD / YYYY | | |
| Official | Form 106J | | | | | |
| Schedul | e J: Your Ex | penses | | | | 12/15 |
| (if known). Ans Part 1: Des 1. Is this a joi Ves. D Yes. D 2. Do you hav Do not list D Debtor 2. | cribe Your Househout case? to to line 2 oes Debtor 2 live in a service dependents? | old separate household? | nses for Separate Household of Deb Dependent's relationship to Debtor 1 or Debtor 2 Child Child | | Does depen with you? No. Yes. No. Yes. | |
| | f people other | No Yes | | | | |
| | mate Your Ongoing | Monthly Expenses | | | | |
| Estimate your expenses as of applicable da | r expenses as of your b of a date after the ban ite. | pankruptcy filing date unless y | rou are using this form as a supp plemental Schedule J, check th if you know the value of | • | • | |
| such assistan | ice and have included | it on Schedule I: Your Income | (Official Form B 106I.) | | Y | our expenses |
| any rent fo | or the ground or lot. 4. | xpenses for your residence. In | clude first mortgage payments and | | 4. | \$850.00 |
| 4a. Real e | luded in line 4: state taxes | | | | 4a | \$0.00 |

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

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Debtor 1 Dorothy C. Edwards Case number (if known)
First Name Middle Name Last Name

| 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies | \$0.00 \$50.00 \$0.00 \$55.00 \$0.00 |
|--|--|
| 6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 6d | \$50.00 \$0.00 \$55.00 \$0.00 |
| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 6d | \$0.00 \$55.00 \$0.00 |
| 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 6d | \$0.00 \$55.00 \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 6d | \$55.00 \$0.00 |
| 6d. Other. Specify: 6d | \$0.00 |
| | |
| 7. Food and housekeeping supplies | #004 00 |
| f. | \$381.00 |
| 8. Childcare and children's education costs 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | \$20.00 |
| 10. Personal care products and services | \$15.00 |
| 11. Medical and dental expenses | \$0.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | \$50.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | \$0.00 |
| 14. Charitable contributions and religious donations 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | |
| 15a. Life insurance | \$0.00 |
| 15b. Health insurance | \$0.00 |
| 15c. Vehicle insurance | \$159.00 |
| 15d. Other insurance. Specify: 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | |
| Specify: | \$0.00 |
| 17. Installment or lease payments: | |
| 17a. Car payments for Vehicle 1 | \$189.68 |
| 17b. Car payments for Vehicle 2 | \$0.00 |
| 17c. Other. Specify: 17c | \$0.00 |
| 17d. Other. Specify: 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | |
| 19. Other payments you make to support others who do not live with you. Specify: 19. | |
| | \$0.00 |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property | \$0.00 |
| 20b. Real estate taxes. | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | \$0.00 |
| 20e. Homeowner's association or condominium dues | \$0.00 |

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| Debtor 1 Dorot | • | C. | Edwards | Case number (if known) | | |
|-----------------------|-----------------------------|---------------------|---|------------------------|-----|------------|
| First N | lame | Middle Name | Last Name | | | |
| 21. Other. Spe | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| | your monthly expenses. | | | | | \$1,769.68 |
| | ies 4 through 21. | | | | | \$0.00 |
| . , | ` , , , | ,, | , from Official Form 106J-2 | | | \$1,769.68 |
| | ie 22a and 22b. The resul | | enses. | | 22. | |
| 23. Calculate | our monthly net income | е. | | | | |
| 23a. Copy | ine 12 (your combined me | onthly income) from | Schedule I. | | 23a | \$1,778.48 |
| 23b. Copy | your monthly expenses fro | om line 22 above. | | | 23b | \$1,769.68 |
| | ct your monthly expenses | | ncome. | | | \$8.80 |
| The re | sult is your monthly net in | ncome. | | | 23c | |
| | | | loan within the year or do yo modification to the terms of | | | |

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| Fill in this infor | rmation to identify your ca | ase: | | |
|---------------------|-----------------------------|-------------|------------------------------|---|
| Debtor 1 | Dorothy | C. | Edwards | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | _ |
| Case number | | | (, | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | |
|-----|--|---|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? | |
| | ✓ No | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| | | | |
| | | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and | |
| x | /s/ Dorothy Edwards | * | |
| | Signature of Debtor 1 | Signature of Debtor 2 | |
| | Date 11/9/2017 | Date | |
| | MM/DD/YYYY | MM/DD/YYYY | |

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| | | | 00001 | | | | | | |
|--------------------------|--|------------------------------|------------------------------|----------------------|----------------------------------|-------------------------------|-----------------------|----------|--|
| Fill in this | information to | identify your | case. | | | | | | |
| Debtor 1 | Dorothy | | C. | Nome | Edwards | | | | |
| Debtor 2 | First Nar | ne | Middle | Name | Last Nam | е | | | |
| (Spouse, if fil | ng) First Nar | ne | Middle | e Name | Last Nam | е | - | | |
| United Sta | tes Bankruptcy | Court for the: | Northern | | District of Illino | | | | |
| Case num | ber | | | | (Stat | e) | - | | |
| Offici | al Form | 107 | | | | | | | Check if this is amended filing |
| | | | al Affairs | for Inc | dividuals | Filing fo | r Bankrı | uptcy | 04 |
| information number (i | on. If more sp f known). An | pace is need swer every o | ed, attach a se question. | parate sh | eet to this form | . On the top o | | | supplying correct e your name and case |
| | at is your curr | | | s and wr | nere You Lived | Betore | | | |
| - | | ent mantai si | atusi | | | | | | |
| - 11 | Married | | | | | | | | |
| 一声 | | | | | | | | | |
| ✓ | Not married | | | | | | | | |
| | Not married | years, have y | ou lived anywhe | re other ti | han where you liv | ve now? | | | |
| | Not married | years, have y | ou lived anywhe | re other tl | han where you liv | ve now? | | | |
| | Not married ing the last 3 | | | | han where you liv | | now. | | |
| | Not married ing the last 3 | | | | - | | now. | | |
| | Not married ing the last 3 | | | ıst 3 years. | - | | now. | | Dates Debtor 2 lived there |
| | Not married ing the last 3 No Yes. List all o | | | ast 3 years. Dates | . Do not include v | where you live Debtor 2: | now. is Debtor 1 | | |
| | Not married ing the last 3 No Yes. List all of | | | ast 3 years. Dates | . Do not include v | where you live Debtor 2: | | | there |
| | Not married ing the last 3 No Yes. List all o | f the places y | | Dates there | . Do not include v | where you live Debtor 2: | is Debtor 1 | | there |
| | Not married ing the last 3 No Yes. List all of Debtor 1: | f the places y | | Dates there | . Do not include v | Debtor 2: | is Debtor 1 | | there Same as Debtor 1 |
| | Not married ing the last 3 No Yes. List all of Debtor 1: 10132 S. Bell Number Street | f the places y | ou lived in the la | Dates there | Debtor 1 lived | Debtor 2: Same a | is Debtor 1 eet | | Same as Debtor 1 From |
| | Not married ing the last 3 No Yes. List all of Debtor 1: 10132 S. Bell Number Street | f the places y | ou lived in the la | Dates there | Debtor 1 lived | Debtor 2: Same a Number Str | eet State | Zip Code | there Same as Debtor 1 From To |
| | Not married ing the last 3 No Yes. List all of Debtor 1: 10132 S. Bell Number Street | f the places y | ou lived in the la | Dates there | Debtor 1 lived | Debtor 2: Same a Number Str | is Debtor 1 eet | Zip Code | Same as Debtor 1 From |
| | Not married ing the last 3 No Yes. List all or Debtor 1: 10132 S. Bell Number Street Chicago City | t Illinois State | ou lived in the la | Dates there From To | Debtor 1 lived 10/2006 10/2015 | Debtor 2: Same a Number Str | eet State as Debtor 1 | Zip Code | there Same as Debtor 1 From To |
| | Not married ing the last 3 No Yes. List all of Debtor 1: 10132 S. Bell Number Street Chicago City | t Illinois State | ou lived in the la | Dates there From To | Debtor 1 lived | Debtor 2: Same a Number Str | eet State as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| | Not married ing the last 3 No Yes. List all or Debtor 1: 10132 S. Bell Number Street Chicago City | t Illinois State | ou lived in the la | Dates there From To | Debtor 1 lived 10/2006 10/2015 | Debtor 2: Same a Number Str | eet State as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From From |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Case number (if known)

Edwards

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$2336.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$14773.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$16309.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est. 2017 YTD LINK \$3,810.00 From January 1 of current year until Est. 2017 YTD Child the date you filed for bankruptcy: Support \$8,294.00 Est. 2016 LINK \$4,572.00 For last calendar year: Est. 2016 Child (January 1 to December 31, 2016) Support \$9,048.00 Est. 2015 LINK \$762.00 For the calendar year before that: Est. 2015 Child (January 1 to December 31, 2015 \$9,048.00 Support

Debtor 1 Dorothy

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Edwards Debtor 1 Dorothy Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| Mithin 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? nsiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Dates of payment paid Amount you still owe Reason for this payment Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nsider? | or 1 | Dorothy | | C. | Ed | wards | Case number | (if known) |
|---|--------------------|---|--|--|---|---|--|---|
| insider include your relatives; any general partners; relatives of any general partners; partnerships of which you are and officer, director, person in control, or owner of 120% or more of their voting securities; and any managing gent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Dates of payment Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Total amount and amount you still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Dates of payment Insider's Name Number Street Insider's Name Number Street Dates of payment Insider's Name Number Street Dates of payment Insider's Name Number Street Dates of payment all amount paid Insider's Name Number Street Dates of payment all amount paid Insider's Name Number Street Dates of payment all amount paid Insider's Name | | First Name | | Middle Name | Las | st Name | | |
| Yes. List all payments to an insider. Dates of payment Total amount you still owe | nsio orp ger | ders include your porations of whic nt, including one | relatives; a h you are a for a busin | iny general partner in officer, director, ness you operate a | s; relatives of any person in control, | general partners; par or owner of 20% or | tnerships of which y r more of their voting | ou are a general partner; g securities; and any managing |
| Dates of payment Dates of payment Amount you still owe Reason for this payment still owe Reason for this payment Street City State Zip Code City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Not payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you Reason for this payment Include creditor's name Insider's Name Number Street City State Zip Code | ✓ | | manuta ta d | ii | | | | |
| Number Street City State Zip Code | Ш | res. List all pay | ments to a | an insider. | | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | | | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Insider's Name Number Street City State Zip Code Insider's Name Insider's Name Insider's Name Insider's Name Insider's Name | | Number Street | | | | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? nclude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Reason for this payment Include creditor's name Insider's Name Number Street City State Zip Code | | City | State | Zip Code | | | | |
| City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Insider's Name Number Street City State Zip Code Insider's Name Insider's Name | | Insider's Name | | | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name | | Number Street | | | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name | | City | State | Zip Code | | | | |
| Number Street City State Zip Code Insider's Name | Inclu | ide payments on No | _ | _ | sider. Dates of | | - | |
| City State Zip Code Insider's Name | | Insider's Name | | | | | | |
| Insider's Name | | Number Street | | | | | | |
| | | City | State | Zip Code | | | | |
| Number Street | | Insider's Name | | | | | | |
| | | Number Street | | | | | | |
| City State Zip Code | | City | State | Zin Code | | | | |

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Edwards Debtor 1 Dorothy Case number (if known) Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Dorothy First Name | C. Middle Name | Edwards Last Name | Case number (if known) | |
|------|---|-------------------------|--|--|------------------------|
| 11. | Within 90 days before you for accounts or refuse to make | | | bank or financial institution, set off any a | nounts from your |
| | ✓ No Yes. Fill in the details. | | | | |
| | | | Describe the action th | e creditor took Date actio was taken | n Amount |
| | Creditor's Name | | - | | <u> </u> |
| | Number Street | | Last 4 digits of account | number: XXXX- | |
| | City State | Zip Code | - | | |
| 12. | Within 1 year before you file appointed receiver, a custo | | | possession of an assignee for the benefit | of creditors, a court- |
| | ✓ No ☐ Yes | | | | |
| Part | List Certain Gifts and | l Contributions | | | |
| 13. | | iled for bankruptcy, di | d you give any gifts with a t | otal value of more than \$600 per person? | |
| | No Yes. Fill in the details for | or each gift. | | | |
| | Gifts with a total value per person | of more than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| | | | | | |
| | Person to Whom You Ga | ave the Gift | - | | |
| | Number Street | | _ | | |
| | City State Person's relationship to y | • | | | |
| | Person to Whom You Ga | ave the Gift | - | | _ |
| | Number Street | | - | | |
| | City State Person's relationship to y | • | - | | |

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| | Dorothy | C. | Edwards | Case number (if know) | 7) | |
|-------|--|--|--|------------------------|-----------------------------------|----------------------|
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| . Wit | thin 2 years before you file | ed for bankruptcy, did | l you give any gifts or contributions | with a total value o | f more than \$600 | to any charity? |
| | No | | | | | |
| ✓ | | | | | | |
| | Yes. Fill in the details for | each gift or contributi | on. | | | |
| | Gifts or contributions to | charities | Describe what you contribute | d | Date you | Value |
| | that total more than \$60 | | 200020 ,02 002200 | - | contributed | 14.40 |
| | • | | | | | |
| | | | _ | | | |
| | Charity's Name | | | | | |
| | | | _ | | | |
| | | | | | | |
| | Number Street | | - | | | |
| | | | | | | |
| | City State | Zip Code | - | | | |
| | , | · | | | | |
| rt 6: | List Certain Losses | | | | | |
| ✓ | nbling? No Yes. Fill in the details. Describe the property yo | ou lost and | Describe any insurance cover | age for the loss | Date of your | Value of property |
| | how the loss occurred | | Include the amount that insuran pending insurance claims on line A/B: Property. | ce has paid. List | loss | lost |
| | | | 77211 Topoliyi | | | |
| | | | | | | |
| | List Certain Payments | T | | | | |
| abo | out seeking bankruptcy or | preparing a bankrup | | | | anyone you consulted |
| abo | out seeking bankruptcy or | preparing a bankrup | | | | anyone you consulted |
| abo | but seeking bankruptcy or lude any attorneys, bankrupt | preparing a bankrup | tcy petition? | | | anyone you consulted |
| abo | out seeking bankruptcy or lude any attorneys, bankrupt No | preparing a bankrup | tcy petition? or credit counseling agencies for service | es required in your ba | nkruptcy. | |
| abo | out seeking bankruptcy or lude any attorneys, bankrupt No | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p | es required in your ba | nkruptcy. Date payment | Amount of |
| abo | out seeking bankruptcy or lude any attorneys, bankrupt No | preparing a bankrup | tcy petition? or credit counseling agencies for service | es required in your ba | Date payment or transfer | |
| abo | out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details. | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p | es required in your ba | Date payment or transfer | Amount of |
| abo | out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | preparing a bankrup tcy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | preparing a bankrup tcy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | preparing a bankrup tcy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State | preparing a bankrup tcy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address | preparing a bankrup tcy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Pay | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Was Paid | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Pay | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Was Paid | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Was Paid | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Mas Paid Number Street | preparing a bankrup tcy petition preparers, o 60603 Zip Code /ment, if Not You | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Was Paid | preparing a bankrup tcy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Mas Paid Number Street City State | preparing a bankrup tcy petition preparers, o 60603 Zip Code /ment, if Not You | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Mas Paid Number Street | preparing a bankrup tcy petition preparers, o 60603 Zip Code /ment, if Not You | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |

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| Debt | | Dorothy First Name | C. Middle Name | Edwards Case Last Name | e number <i>(if known)</i> | | | |
|------|------|--|------------------------|--|--------------------------------------|--|----------|------------------------------|
| 17. | help | hin 1 year before you filed for p you deal with your creditors not include any payment or tran No | or to make paymen | | f pay or transfer | any property to a | nyone v | who promised to |
| | Ħ | Yes. Fill in the details. | | | | | | |
| | | | | Description and value of any prope transferred | rty | Date payment or transfer was made | Amou | nt of payment |
| | | Person Who Was Paid | | | | | | |
| | | Number Street | | | | | | |
| | | City State | Zip Code | | | | | |
| | Incl | ordinary course of your busing ude both outright transfers and transfers that you have already No Yes. Fill in the details. | transfers made as secu | urity (such as the granting of a security it. | | | y). Do n | |
| | | | | Description and value of property transferred | Describe any payments re in exchange | y property or ceived or debts p | aid | Date transfer was made |
| | | Person Who Received Transfer | r | | | | | |
| | | Number Street | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | |
| | | Person Who Received Transfer | r | | | | | |
| | | Number Street | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | |
| 19. | ben | neficiary? ese are often called asset-protec | | ou transfer any property to a self-set | tled trust or sim | ilar device of whic | ch you a | are a |
| | | No Yes. Fill in the details. | | | | | | |
| | Ш | res. Fill III the details. | | Description and value of the prop | erty transferred | | | Date transfer was made |
| | | Name of trust | | | | | | |

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C Edwards Debtor 1 Dorothy Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Chase Bank Checking XXXX-12/2016 \$ 5.00 Person Who Was Paid Savings P.O. Box 659732 Number Street Money market Brokerage San Antonio 78265 Texas Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Number Street City State Zip Code City State Zip Code

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Edwards Debtor 1 Dorothy _ Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | Dorothy First Name | C | | Edwards | Case nu | mber (if known) | |
|------|----------|----------------------------|------------------|--------------------|----------------------------|-----------------------|---|--------------------|
| | | First Name | IV | liddle Name | Last Name | | | |
| 26. | Hav | e you been a party | y in any judicia | al or administrati | ive proceeding under | any environmental l | aw? Include settlements and order | rs. |
| | / | No | | | | | | |
| | | Yes. Fill in the det | tails. | | | | | |
| | | | | Co | ourt or agency | N | ature of the case | Status of the case |
| | | Case title | | | ourt Name | | | Pending |
| | | | | | | | | On appeal |
| | | Case number | | | ımberStreet | | | Concluded |
| | | | | Cit | y State | Zip Code | | _ |
| Pari | 11: | Give Details Ab | oout Your Bu | siness or Con | nections to Any Bu | siness | | |
| 27. | With | nin 4 years before | you filed for b | ankruptcy, did ye | ou own a business or | have any of the follo | wing connections to any business? | • |
| | | - | | | | - | | |
| | | | | - | e, profession, or other | | the or part-urne | |
| | | A member of A partner in a | | ity company (LLC | C) or limited liability pa | rtnersnip (LLP) | | |
| | | | | aging executive | of a corporation | | | |
| | | | | | or a corporation | ocration | | |
| | | All owner or a | at 16a5t 5 /0 UI | ule voulig of equ | illy securilles or a corp | Joradon | | |
| | ✓ | No. None of the a | | | | | | |
| | | Yes. Check all that | at apply above | and fill in the de | etails below for each b | ousiness. | | |
| | | | | | Describe the natu | ire of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | | | EIN: | |
| | | Number Street | | | | | Dates business existed | |
| | | | | | Name of account | ant or bookkeeper | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ire of the business | Employer Identification nu include Social Security nu | |
| | | | | | | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | | | Dates business existed | |
| | | | | | Name of account | ant or bookkeeper | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ire of the business | Employer Identification nu include Social Security nu | |
| | | Duoin N | | | | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | | | Dates business existed | |
| | | 011 | 01.1 | | Name of accounta | ant or bookkeeper | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |

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| Deb | tor 1 Dorothy | | C. | Edwards | Case number (if known) |
|------|------------------------|--------------------------------------|--|-------------------------------|--|
| | First Name | | Middle Name | Last Name | |
| 28. | creditors, or othe | | bankruptcy, did y | ou give a financial statem | ent to anyone about your business? Include all financial institutions, |
| | ✓ No Yes. Fill in the | e details below. | | | |
| | _ | | | Date issued | |
| | Name | | | MM/DD/YYYY | - |
| | Number Str | reet | | _ | |
| | | | | _ | |
| | City | State | Zip Code | | |
| Part | t 12: Sign Below | ı | | | |
| 1 | true and correct. I | understand that can result in fin | making a false st es up to \$250,000, | atement, concealing prop | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /s/ Dorothy Edw gnature of Debtor | | | Signature of Debtor 2 |
| | Si | griature or Debtor | 1 | | Date |
| | Da | ate 11/9/2017 | | | Date |
| ı | Did you attach add | itional pages to | Your Statement o | f Financial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)? |
| | ✓ No | | | | |
| j | Yes | | | | |
| ı | Did you pay or agre | ee to pay someo | ne who is not an a | ttorney to help you fill out | bankruptcy forms? |
| | ✓ No | | | | |
| İ | Yes. Name of p | erson | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1 | Dorothy | C. | Edwards | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | |
| Case number (If known) | | | (Glate) | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. | | | | | | | |
|----|---|--|---|--|--|--|--|--|
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | | | | |
| | Creditor's name: Midwest Title Loans Description of property securing debt: 2001 Chevrolet Impala | Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: | No. ✓ Yes. | | | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | | | |
| - | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | | | |

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| Debtor | Dorothy | C. | Edwards | Case number (if |
|---------|--|-----------------------|--------------------------|--|
| 1 | First Name | Middle Name | Last Name | known) |
| Part 2: | List Your Unexpired Perso | onal Property Leas | es | |
| informa | | ate leases. Unexpired | l leases are leases that | ry Contracts and Unexpired Leases (Official Form 106G), fill in the t are still in effect; the lease period has not yet ended. You may 1 U.S.C. § 365(p)(2). |
| Des | scribe your unexpired personal | property leases | | Will the lease be assumed? |
| Les | ssor's name: | | | □ No □ Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | □ No □ Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | □ No □ Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | □ No □ Yes |
| | scription of leased perty: | | | · · · · · · · · · · · · · · · · · · · |
| Les | ssor's name: | | | □ No □ Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | □ No □ Yes |
| | scription of leased perty: | | | |
| Part 3: | Sign Below | | | |
| | er penalty of perjury, I declare t erty that is subject to an unexp | | my intention about any | property of my estate that secures a debt and any personal |
| × | /s/ Dorothy Edwards | | × | |
| S | ignature of Debtor 1 | | Sig | gnature of Debtor 2 |
| D | ate 11/9/2017 MM/DD/YYYY | | Da | ate MM/DD/YYYY |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| Debtor Debtor Debtor Chapter Debtor Debtor | | | Northern Dis | trict of Illinois | |
|---|-------|---|-------------------------------|------------------------------------|------------------------------------|
| Chapter Chapter | In re | Dorothy C. Edwards | | Case No. | |
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$1,765.00 Prior to the filing of this statement I have received \$2,000 Balance Due \$1,765.00 2. The source of the compensation paid to me was: Debtor | _ | Debtor | | | (If known) |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filling of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept S1,765,00 Prior to the filling of this statement I have received S2,00 Balance Due S1,765,00 2. The source of the compensation paid to me was: Debtor Other (specify) 3. The source of the compensation paid to me is: Debtor Other (specify) 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filling of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION Leertify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. Signature of Altorney Semnad Law Firm | | | | Chapter | Chapter 7 |
| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$1,765.00 Prior to the filing of this statement I have received \$0.00 Balance Due \$1,765.00 2. The source of the compensation paid to me was: Debtor Other (specify) 3. The source of the compensation paid to me is: Debtor Other (specify) 4. Debtor I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not members are associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 Pate Signature of Attorney Signature of Attorney Semnad Law Firm | | DISCLOSURE OF | COMPENSATI | ON OF ATTORNE | Y FOR DEBTOR |
| Prior to the filing of this statement I have received Balance Due 2. The source of the compensation paid to me was: Debtor | 1. | compensation paid to me within one | year before the filing of the | ne petition in bankruptcy, or agre | eed to be paid to me, for services |
| 2. The source of the compensation paid to me was: Debtor | | For legal services, I have agreed to ac | ccept | | \$1,765.00 |
| 2. The source of the compensation paid to me was: Debtor | | Prior to the filing of this statement I | have received | | \$0.00 |
| 3. The source of the compensation paid to me is: Other (specify) | | Balance Due | | | \$1,765.00 |
| 3. The source of the compensation paid to me is: Debtor | 2. | . The source of the compensation paid | d to me was: | | |
| Under (specify) 4. ☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. ☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filling of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 Date CERTIFICATION Signature of Attomey Semrad Law Firm | | ✓ Debtor | Other (speci | fy) | |
| 4. | 3. | . The source of the compensation paid | d to me is: | | |
| I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filling of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 Date Signature of Attorney Semrad Law Firm | | ✓ Debtor | Other (speci | fy) | |
| members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 Date Signature of Attorney Semrad Law Firm | 4. | | | tion with any other person unles | s they are |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 /s/ Amy Gerstein Signature of Attorney Semrad Law Firm | | members or associates of my law | v firm. A copy of the agree | | |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 Date Signature of Attorney Semrad Law Firm | 5. | a. Analysis of the debtor's finan | _ | • | • |
| CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 | | b. Preparation and filing of any | petition, schedules, stater | ments of affairs and plan which r | may be required; |
| CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 Date /s/ Amy Gerstein Signature of Attorney Semrad Law Firm | | c. Representation of the debtor | at the meeting of creditor | s and confirmation hearing, and | any adjourned hearings thereof; |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 | 6. | . By agreement with the debtor(s), the | above-disclosed fee does | not include the following service | es: |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 11/9/2017 | | | | | |
| debtor(s) in this bankruptcy proceedings. 11/9/2017 Date /s/ Amy Gerstein Signature of Attorney Semrad Law Firm | | | CERTIF | ICATION | |
| Date Signature of Attorney Semrad Law Firm | | | te statement of any agreer | nent or arrangement for paymen | t to me for representation of the |
| Semrad Law Firm | | 11/9/2017 | | /s/ Amy Gerstein | |
| | | Date | | Signature of Attorney | |
| Name of law firm | | | | Semrad Law Firm | |
| | | | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | filing fee administrative fee |
|---|----------|----------------------------------|
| + | <u> </u> | |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Edwards, Dorothy C. Debtor(s) | Case No | Case No | | |
|-----------------|---|--|--------------------------------------|--|--|
| | | Chapter. | Chapter7 | | |
| | VERIFIC | CATION OF CREDITOR MAT | TRIX | | |
| TI knowledge | - · · · · · · · · · · · · · · · · · · · | y that the attached list of creditors is tr | rue and correct to the best of their | | |
| Date: | 11/9/2017 | /s/ Edwards, Do Edwards, Dorott Signature of Del | ny C. | | |

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Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

US DEPT OF ED/GLELSI 2401 Internal Lane Attn: Chhengre Lim Madison, WI, 53704

OVERLND BOND 4701 W FULLERTON CHICAGO, IL, 60639

CREDIT ACCEPTANCE 25505 West 12 Mile Road Ste. 3000 Southfield, MI, 48034

NTL ACCT SRV 1246 University # 421 Saint Paul, MN, 55104

Fifth Third Bank 8140 S. Ashland Ave. Chicago, IL, 60620

LVNV FUNDING LLC PO Box 10587 Greenville, SC, 29603

Credit One Bank PO Box 60500 City of Industry, CA, 91716

PORTFOLIO RECOV ASSOC 120 CORPORATE BLVD STE 1 NORFOLK, VA, 23502

HSBC Bank Nevada, N.A 1111 N Town Center Dr Las Vegas, NV, 89144

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL, 32256

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AT&t Uverse PO Box 64794 Saint Paul, MN, 55164

AT&T Mobility One AT&T Way, Room 3A 104 Bedminster, NJ, 07921

CON COL MGMN POB 1839 MARYLAND HEIGHTS, MO, 63043

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

AT&T 2001 York Rd Oak Brook, IL, 60523

MCCARTHY BURGESS & WOL 26000 Cannon Rd Bedford, OH, 44146

Nicor Gas Po Box 549 Aurora, IL, 60507

Midwest Title Loans 2941 W 159th St Markham, IL, 60428

IDOR-Bankruptcy Section Po Box 851388 Minneapolis, MN, 55485

DriveTime PO Box 29018 Phoenix, AZ, 85038

Comcast p.o. box 196 Newark, NJ, 07101 Progressive Leasing 256 West Data Drive Draper, UT, 84020

Crest Financial 61 W 13490 S Allie Rodriguez Draper, UT, 84020

Credit Collection Services 725 Canton Street Norwood, MA, 02062

Geico Casualty Company One Geico Center Macon, GA, 31296

CMRE FINANCIAL SERVICE 3075 E Imperial Hwy Ste 200 Brea, CA, 92821

Radiology Imaging Consultants, SC - Harvey 75 Remittance Dr., Dept 1254 Chicago, IL, 60675

Aarons 7311 S. Ashland Chicago, IL, 60636

First National Collection Bureau, Inc PO BOX 1259 Oaks, PA, 19456

The Psychology Center, Inc. 10343 S. Western Avenue Chicago, IL, 60643

Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter, IL, 60181

Capital One PO Box 85520 Richmond, VA, 23285

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,765.00

attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

| Date: 11/09/2017 | |
|------------------|--------|
| Client // | Client |
| Attorney | |

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| Debtor 1 Dorothy First Name | C, | Edwards | Case number (if known) | | |
|---|---|------------------------|---|--|--|
| | Middle Name estions for Reporting Pur | Last Name | | | |
| ¹⁶ . What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that funds will be available to distribute to unsecured creditors? No. Yes. | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | | - Bottom | 25,001-50,000 50,001-100,000 More than 100,000 | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,00 \$50,00 | ,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| ^{20.} How much do you estimate your liabilities to be? | □ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$10,00 \$50,00 | ,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| Part 7: Sign Below | | | | | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | |
| | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document. I have obtained and read the notice required by 11 U.S.C. 6.342(b) | | | | |
| | out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | |
| | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | Signature of Debtor 1 | | Signature of Debtor | 72 | |
| | Executed on11/9/ MI | /2017 M / DD / YYYY | Executed on | MM / DD / YYYY | |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|----------------------|---|--|
| Debtor 1 | Dorothy | C. | Edwards | | |
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number (If known) | | | (State) | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| art 1: Sign Below | | 1942011 2021 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
|---|---|--|
| Did you pay or agree to pay someone who is NOT an attorney | to help you fill out bankruptcy forms? | |
| ☑ No | | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| | | |
| | | |
| Under penalty of perjury, I declare that I have read the summ | ary and schedules filed with this declaration and | |
| that they are true and correct. | | |
| ★ /s/ Dorothy Edwards | * | |
| Signature of Debtor 1 | Signature of Debtor 2 | |
| Date 11/9/2017 | Date | |
| MM/DD/YYYY | MM/DD/YYYY | |

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| Debtor 1 | | C. | Edwards | Case number (if known) |
|----------|---|-------------------------------|-------------------------------|---|
| | First Name | Middle Name | Last Name | |
| | thin 2 years before editors, or other pa | | you give a financial stater | nent to anyone about your business? Include all financial institutions, |
| Z | No Yes. Fill in the de | tails below. | | |
| لبسة | | | Date issued | |
| | | | Date Issueu | |
| | Name | | MM/DD/YYYY | _ |
| | Number Street | | | |
| | City | State Zip Code | | |
| | - | 2.p 0000 | | |
| Part 12: | Sign Below | | | |
| | nkruptcy case can | | | erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signat | ure of Debtor 1 | | Signature of Debtor 2 |
| | Date | 11/9/2017 | | Date |
| Did y | ou attach addition | nal pages to Your Statement o | of Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| V | No | | | |
| | Yes | | | |
| Did y | ou pay or agree to | pay someone who is not an a | attorney to help you fill ou | bankruptcy forms? |
| I | No | | | |
| | Yes. Name of person | n | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| eptor | Dorothy | C. | Edwards | Case number (if |
|--------------|---|--|--|--|
| | First Name | Middle Name | Last Name | known) |
| 2: | List Your Unexpire | d Personal Property Leas | ses | |
| rmat | ion below. Do not list | | d leases are leases that a | Contracts and Unexpired Leases (Official Form 106G), fill in the re still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2). |
| Des | cribe your unexpired p | personal property leases | | Will the lease be assumed? |
| Less | sor's name: | | | □ No □ Yes |
| Desc | cription of leased erty: | | TA A MANAGEMENT THE MANAGEMENT OF A THAT A THAT A A MANAGEMENT AND A MANAG | |
| Less | or's name: | | AND THE RESIDENCE OF THE PARTY | □ No □ Yes |
| Desc | cription of leased erty: | | | |
| Less | or's name: | | | □ No □ Yes |
| Desc | cription of leased erty: | | | Name of the second seco |
| Less | or's name: | | | □ No □ Yes |
| Desc prop | cription of leased erty: | | | |
| Less | or's name: | | anni anni ann an an ann an ann an ann an | □ No □ Yes |
| Desc prop | eription of leased erty: | | | |
| Less | or's name: | | | □ No □ Yes |
| Desc prop | ription of leased erty: | | | |
| | or's name: | | | □ No □ Yes |
| Desc | • | | | Bertonia. |
| 3: | Sign Below | te executiva de la constantida de la c | | |
| nder rope | penalty of perjury, I c rty that is subject to a | declare that I have indicated an unexpired lease. | my intention about any p | roperty of my estate that secures a debt and any personal |
| | s/ Dorothy Edwards nature of Debtor 1 | W.M. | Sign: | ature of Debtor 2 |
| | te 11/9/2017 MM/DD/YYYY | | Date | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Edwards, Dorothy C. | Case No | |
|-----------------|---------------------|--|------------------------------------|
| | Debtor(s) | 0.00 110 | |
| | | Chapter. | Chapter7 |
| | VERIF | CATION OF CREDITOR MATE | RIX |
| Tł knowledge | | ify that the attached list of creditors is tru | e and correct to the best of their |
| Date: | 11/9/2017 | /s/ Edwards, Doro | othy C. |
| | | Edwards, Dorothy Signature of Debte | |

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| Debtor 1 Dorothy | C. | Edwards | Case number (if kn | own) | |
|---|--|--|---------------------------------|----------------------|------------------------------|
| First Name | Middle Name | Last Name | Column A Debtor 1 | Column B Debtor 2 or | |
| 8. Unemployment compensation Do not enter the amount if you under the Social Security Act. I | contend that the amount | | \$ <u>0.00</u> | non-filing spouse | |
| For your spouse | | \$0.00 \$0.00 | | | |
| 9.Pension or retirement incon benefit under the Social Securi | ne. Do not include any amo | ount received that was a | \$0.00 | | |
| 10.Income from all other sour amount. Do not include any b payments received as a victim international or domestic terror page and put the total below. | ces not listed above. Specenefits received under the soft a war crime, a crime aga | Social Security Act or inst humanity, or | | | |
| Other Government Assistance | | | \$381.00 | | |
| Total amounts from separate p | ages, if any. | | +\$0.00 | + | |
| 11. Calculate your total currer | nt monthly income. Add li | nes 2 through 10 for | \$1,470.67 | + | = \$1,470.67 |
| each column. Then add the total t | or Column A to the total fo | or Column B. | | | |
| | | | | | Total current monthly income |
| Part 2: Determine Whether | the Means Test Appl | ies to You | | | • |
| 12. Calculate your current mon12a. Copy your total current m | - | | Сору | / line 11 here → | \$1,470.67 |
| Multiply by 12 (the numb | | | | | X 12 |
| 12b. The result is your annual | income for this part of the | form. | | 12b. | \$17,648.04 |
| 13 Calculate the median family | income that auntica to | rou. Follow these stone | | L | |
| | | Illinois | | | |
| Fill in the state in which you liv | 3. Arrows | 3 | | | |
| Fill in the number of people in | your household. | distribution of the contract o | | _ | |
| Fill in the median family income household. | e for your state and size of | | | 13. | \$78,559.00 |
| To find a list of applicable med instructions for this form. This | | | | • | |
| 14. How do the lines compare? | | | | | |
| 14a. Line 12b is less than Go to Part 3. | or equal to line 13. On the | top of page 1, check box | 1, There is no presumption o | f abuse. | |
| 14b. Line 12b is more that Go to Part 3 and fill o | n line 13. On the top of pa ut Form 122A-2. | ge 1, check box 2, The pro | esumption of abuse is determine | ined by Form 122A-2. | |
| Part 3: Sign Below | | | | | |
| | | | | | |
| By signing here, I declare und | er penalty of perjury that th | e information on this state | ment and in any attachments | is true and correct. | |
| ✗ /s/ Dorothy Edwards | V. h | · × | | | |
| Signature of Debtor 1 | | | Signature of Debtor 2 | | - |
| Date 11/9/2017 | | | Date 11/9/2017 | | |
| MM/DD/YYYY | | | MM/DD/YYYY | | |
| If you checked line 14a, do If you checked line 14b, fill | | | e superior e | | |